## Modern Slavery Statement

Reporting Period 1 Jul 2023 – 30 June 2024

i-med.com.au



Comprehensive care. Uncompromising quality.



#### Acknowledgement of Country

I-MED Radiology Network acknowledges the Traditional Custodians and owners of Country on which we operate, live and work. We acknowledge their connections to land, sea and community. We pay our respect to their Elders past and present and extend that respect to all Aboriginal and Torres Strait Islander peoples today.



## Message from CEO

As an organisation committed to ethical practices and social responsibility, I-MED Radiology Network takes its obligations to prevent modern slavery in all its forms extremely seriously. As the largest provider of medical imaging services across Australia and New Zealand, we are acutely aware of our responsibility to eradicate modern slavery. Modern slavery is an issue that transcends borders, industries, and supply chains, and it is incumbent upon us to ensure that we do everything in our power to uphold the fundamental rights and dignity of every individual involved in our business operations. We understand that modern slavery whether through forced labour, human trafficking, or exploitation—is a global challenge, and it is one that requires vigilance, transparency, and continuous improvement.

To that end, we are committed to transparency in our efforts to address modern slavery, and we take pride in publishing our Modern Slavery Statement annually. This report outlines the steps we have taken to identify, assess, and mitigate risks related to modern slavery within our business and supply chains. Our approach is built on a foundation of strong governance, internal awareness, supplier engagement, and rigorous monitoring. We work closely with our partners to promote ethical labour practices and ensure that every part of our supply chain aligns with our values of fairness, integrity, and respect for human rights. We also encourage our people to report any concerns related to modern slavery, knowing that their safety and privacy will always be protected.

Together, we can make a meaningful difference and ensure that I-MED Radiology Network continues to be a leader in medical imaging, healthcare and ethical practices.

#### Dr Shrey Viranna

Chief Executive Officer I-MED Radiology Network

# Reporting entity and organisational structure

#### **Overview**

This Modern Slavery Statement (**Statement**) is made by Image Holdco Pty Ltd (ACN 623 028 740) (the **Reporting Entity**) pursuant to the Modern Slavery Act 2018 (Cth) (**Act**). This Statement is submitted by the Reporting Entity as a joint statement on behalf of its wholly owned subsidiaries (together, referred to as the **I-MED Group** or **I-MED**).

This Statement sets out the actions taken by the I-MED Group in assessing modern slavery risks in its operations and supply chains, and the actions it has taken to address, monitor and prevent these, in the period 1 July 2023 to 30 June 2024 (**Reporting Period**).

The Statement has been approved by the Board of the Reporting Entity on behalf of the I-MED Group.



#### Who is the I-MED Group?

Across Australia and New Zealand, we operate 240 clinics and perform approximately 7 million patient procedures each year, making us one of the largest providers of medical imaging in the world. With over 450 doctors and 4,000 staff actively sharing clinical knowledge and expertise, a consistently high level of service is assured across all clinics. Our extensive teleradiology operation supports over 2 million patients annually, providing 24/7 radiology reporting across Australia and New Zealand through I-TeleRAD.

#### **Vision and values**

I-MED Group company values are the foundation on which our culture is built.

Our values form a critical part of our organisational identity helping to guide our growth, decision-making and strategic priorities.















#### Quality

We are committed to consistently delivering high-quality and expert care, in each of our clinics and in every interaction, to ensure better health outcomes for patients.

#### Working together

We work together as part of a larger team with our referrers, hospitals and other stakeholders, to deliver the best health outcomes for our patients.

#### Innovation

We find new and improved ways of doing things for the greater good of our patients and have the courage to adapt and deal with change to take us forward.

#### Compassion

Our patients are at the centre of everything we do. We treat our patients, referrers and colleagues as they expect to be treated, and we look after each other.

#### Connection

We are one network that connects locally. We actively listen to feedback from our patients, referrers and colleagues, all in order to help us build a better service.

## I-MED Group operations and Supply chains

#### **Internal operations**

The I-MED Group is comprised of a number of corporate entities. However, we operate a centralised model with shared knowledge, resources, people, IT and corporate services in support of the delivery of the Group's operations.

#### **Board of Directors**

The Board of Directors of the Reporting Entity are responsible for and monitor I-MED Group's operations and corporate governance. The Board meets regularly to discuss, plan and oversee the management of the I-MED Group. Several committees have been formed to support the Board in meeting its oversight obligations. In addition to the Group's robust internal governance framework, I-MED operates within a highly regulated healthcare landscape.

Implementation of the Board's direction and strategy is executed by I-MED Group's executive and senior leadership team. Together, they are responsible for promoting a risk aware and responsible culture and ensuring that there is a systematic process to identify, analyse, evaluate and treat risk, including in anti-slavery practices.

Our Modern Slavery Statement sets out the actions taken in assessing modern slavery risks in our operations and supply chains, as well as the actions we have taken to address, monitor and prevent these. We have established responsibility for managing modern slavery risks and implementing relevant policies and mitigation initiatives.

The Board is responsible for overseeing modern slavery risk management, strategy development and implementation. I-MED's Procurement, Legal, and People and Culture departments support the implementation of this approach, focusing on the policy framework, risk mapping, due diligence, and remediation processes.

Over the coming years, we will be looking to expand on the work done to date and will be prioritising activities that strengthen our due diligence processes, review our suppliers with complex supply chains and offshore operations, improve our understanding and management high-risk industries and procurement categories, and enhance our documentation of what our approach is towards remediation and how we respond to incidents that do not meet our standards, or for which a high modern slavery risk is present.





#### **Our People**

At I-MED, our people are the heart of our organisation and critical to providing high-quality care and services to our patients, referrers and the communities we serve. We are committed to upholding human rights, promoting fair labour practices, and fostering a safe, inclusive, and respectful workplace for all of our people. We recognise our responsibility to safeguard our team members from risks of modern slavery and exploitation and to ensure that their rights and well-being are prioritised across all areas of our organisation.

#### **Our Team**

Our team comprises 450 highly skilled, specialist radiologists and over 4,000 people in roles ranging from technical health professionals to contact centre agents and support services across Australia and New Zealand.

#### **Employment practices**

We are committed to providing a fair, ethical, and transparent workplace where all our people are treated with dignity and respect. We are committed to fair and transparent employment practices, with over 99% of our workforce directly engaged under clear terms outlined in either individual employment contracts, the applicable modern award or an enterprise agreement. We maintain policies and practices that ensure fair and complaint wages, safe working conditions, and reasonable work hours in compliance with national standards. We have proactive and productive relationships with the various industrial unions by which a proportion of our workforce are entitled to be represented.

Our workforce is largely employed on a full-time, part-time, or casual basis. Only a very small proportion of our team (less than 1%), who are usually either highly skilled medical specialists or are consultants for specific short-term engagements or for augmentation of certain corporate functions, are engaged through labour hire arrangements.

#### Ongoing compliance

I-MED's Talent Acquistion team has robust recruitment processes, including the development of position descriptions and job advertisements which accurately reflect the role requirements. The conditions of employment including the pay rate are based on minimum rates outlined in industrial instruments, and in some cases market and candidate expectations, and are outlined with the job offer. Where recruitment agencies are engaged by I-MED, these are reputable agencies engaged on standard terms of business.

I-MED's People and Culture and Payroll teams are responsible for ensuring ongoing compliance with the agreed terms and conditions of employment including remuneration and other entitlements as well as compliance with industrial instruments, relevant laws, regulations and other requirements related to employment. The specialists in these teams provide advice and guidance to business stakeholders on interpretation and compliance with employment terms and conditions, including those under relevant modern awards and enterprise agreements.

The rates, terms and conditions under which our workforce is engaged is benchmarked and audited regularly to ensure compliance with minimum terms and conditions required under the Fair Work Act 2009 (Cth), individual contracts and other applicable industrial instruments where relevant. Pay rules and award interpretation are established and monitored in the Group's workforce management system and systematically checked by the internal teams and audited to ensure ongoing compliance. Updates, changes and amendments to relevant labour laws are also continuously monitored and implemented as required.



#### **Diversity and inclusion**

We believe in cultivating a culture of diversity and inclusion, where everyone feels valued, respected, and empowered. Our diversity policies prohibit discrimination and promote equal opportunities, regardless of gender, ethnicity, religion, disability, or other protected characteristics.

We advocate for diversity across the Group with policies, procedures and programs in place to ensure our culture is one in which everyone belongs and has a positive experience of work through our people experience programs. We monitor information on diversity including in compliance with the Workplace Gender Equality Agency requirements, to ensure we are continually striving for fairness and equality across the Group.



of senior leadership 53% positions are filled by women

43% of our Board members are women



We have a diverse mix of ages amongst our employees with our largest cohort being those between the ages of 30-50



# Workplace policies and procedures

I-MED Group has in place a number of policies aimed at ensuring that I-MED remains a best practice organisation that embodies its vision and company values. All our people are expected to be familiar with and comply with its Code of Conduct and Code of Ethics which outline I-MEDs expectations for actions, performance and behaviour of I-MED Group personnel.

In addition, I-MED has a number of workplace policies and procedures which guide its staff to embody its values in their practices and set out the expected standards of staff behaviour.

These include the following core policies:

- Human Rights Policy
- Whistleblower Policy
- Workplace Health and Safety (WHS) Policy
- Diversity and Inclusion Policy
- Risk Management Policy and Process
- Workplace Behaviours and Equal Opportunity Policy

In addition to the application of some of the above-mentioned policies, various other I-MED Group polices set out core values and principles for how I-MED deal with contractors, customers, suppliers and stakeholders. Specifically:

- Supplier Code of Conduct
- Complaints Handling Policy
- Environmental and Sustainability Policy
- Privacy Statement
- People Privacy Policy

Each of these policies allocate responsibility to senior levels of management for their proper implementation, administration and oversight. All staff are expected to familiarise themselves with these workplace policies and procedures and receive training on these upon commencing work with the I-MED Group and periodically thereafter.

I-MED recognises the importance of protecting human rights and is committed to protecting the rights of all people. The Human Rights Policy promotes human rights in accordance with the UN Guiding Principles on Business and Human Rights. It is guided by the Universal Declaration of Human Rights, including principles contained within the International Bill of Rights and the International Labor Organization's 1998 Declaration on Fundamental Principles and Rights at Work.



Some of those key principles include:

• Forced labour and human trafficking: I-MED prohibits the use of all forms of forced labour, including prison labour, indentured labour, bonded labour, military labour, modern forms of slavery and any form of human trafficking.

• **Child labour:** I-MED prohibits the hiring of individuals that are under 18 years of age for positions in which hazardous work is required.

• Work hours, wages and benefits: I-MED compensates employees competitively relative to the industry and local labour market, and in accordance with terms of any applicable collective bargaining agreements. I-MED works to ensure full compliance with applicable wage, work hours, overtime and benefits laws.

• **Safe and healthy workplace:** The safety and health of I-MED's staff is of paramount importance. Its policy is to provide a safe and healthy workplace and comply with applicable safety and health laws and regulations, as well as internal requirements. I-MED Group works to provide and maintain a safe, healthy and productive workplace.

• **Workplace security:** I-MED is committed to maintaining a workplace that is free from violence, harassment, intimidation and other unsafe or disruptive conditions due to internal and external threats. Security safeguards for employees are provided, as needed, and are maintained with respect for employee privacy and dignity.

• Freedom of association and collective bargaining: I-MED respects the rights of its workforce to join, form or not to join a labour union without fear of reprisal, intimidation or harassment. Where our people are represented by a legally recognised union, I-MED is committed to establishing a constructive dialogue with their freely chosen representatives. I-MED is committed to bargaining in good faith with such representatives.

• **Guidance and reporting:** I-MED strives to create a workplace in which open and honest communications amongst team members are valued and respected. I-MED is committed to comply with applicable labour and employment laws wherever I-MED operates. Through training and an annual certification process I-MED ensures team members are aware of its Human Rights Policy. The Group encourages the reporting of behaviour, conduct or affairs that are inconsistent with I-MED's values, expected standards of conduct and ethical behaviour. The Workplace Policies Handbook contains information on how to raise a grievance in relation to workplace complaints and assurance of how complaints are handled by the Group. In addition, the Whistleblower Policy focuses on transparency and accessibility of the protections available to staff and third parties (e.g. suppliers and their staff) in making a whistleblower disclosure.

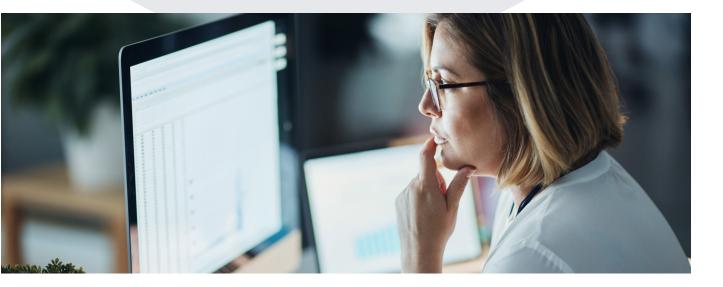
# Supply chains and procurement

I-MED is a major purchaser of a wide range of goods and services. In maintaining our reputation for quality, safety and service excellence, our responsibility extends to the focussed and professional management of our supply chain.

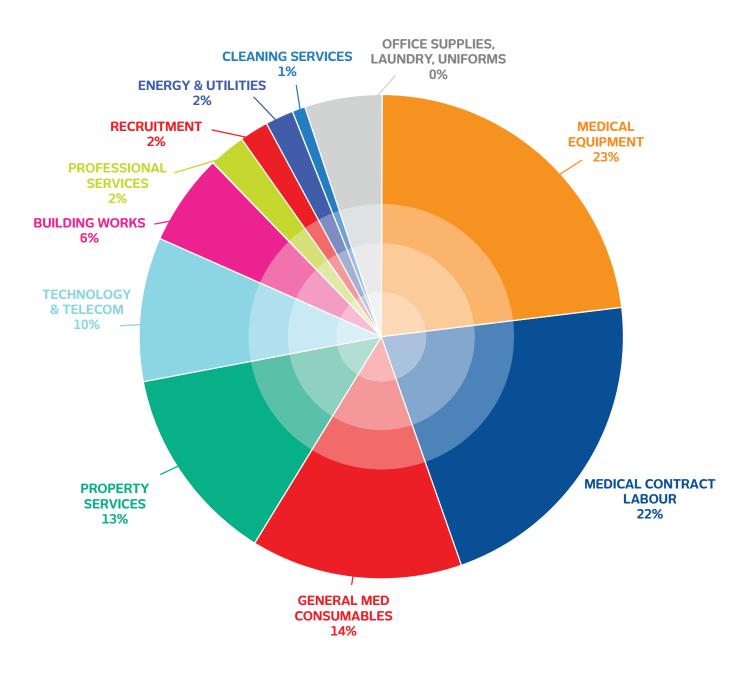


I-MED has extensive supply chains, with more than 4,500 direct suppliers (Tier 1), providing goods and/or services to the whole operation. The graph below illustrates I-MED's spend proportion by product or service category, highlighting that our supply chains are largely focused on sourcing specialised medical equipment and its servicing, medical contract labour, property services and Technology & telecommunication services and products. Although I-MED's tail of supplier spend is extensive, a large portion of spend is sourced locally, from suppliers predominantly headquartered in countries with a low risk of modern slavery, including the United States, European Union, United Kingdom, Australia and New Zealand.

Sourcing from these suppliers is typically via medium-term supply contracts. I-MED expects all its major suppliers, service providers and any other agents or contracted third parties (collectively referred to as **suppliers**) to adopt an approach to ethical business practices and sustainability that is consistent with I-MED's high standards. Suppliers are also expected to promote the same standards in their own supply chains.



I-MED Group operations are supported by the procurement of goods and services from third parties. Externally procured goods and services include the following main categories, based on FY24 third party spend:



### Note1: General Medical Consumables includes other subcategories such as Nuclear/Molecular Imaging Products and Contrast Agents.

The spend is predominately managed through contractual arrangements, ranging from, but not limited to:

- Multi-year standing arrangements governed by I-MED precedent agreements such as longterm Product or Services Master Supply Agreements.
- Bespoke agreements for the procurement of complex and high value goods, including for products such as clinical software, radiology booking platforms and dose radiation management.
- Purchase orders governed by master agreement terms and conditions, such as agreements for professional services or supply of goods.

#### Procurement framework and governance

The I-MED Group undertakes its procurement of goods and services centrally through a national Procurement & Property Team which manages approximately 80% of it needs. The I-MED Group's Procurement Team is comprised of designated category managers who are specialists specialists in their field and have a deep knowledge of their supply categories. Each category manager is responsible for the day-to-day sourcing and management of the Group's material third party procurement for that category.

Suppliers who are a major contributor in the I-MED Group's supply chain are subject to contractual obligations with regards to modern slavery risk, which include obligations regarding ethical procurement and supplier due diligence. Suppliers are also expected to comply with I-MED's Supplier Code of Conduct and Human Rights Policy which explicitly set out the Group's expectations in relation to their compliance with relevant modern slavery legislation, including not to use any form of bonded, slave or child labour – and to comply with the Human Rights Policy.

In addition, I-MED expects that all suppliers provide a safe, healthy and comfortable workplace, including that they comply with all relevant workplace health and safety laws and regulations as well as the Group's safety principles. I-MED also expects suppliers to only employ those individuals with a legal right to work in the relevant jurisdiction, comply with all minimum legal entitlements and conditions of work, and to provide and support freedom of association for individuals to join trade unions and other employee representative groups.



# Risks of modern slavery and actions taken

During the Reporting Period, I-MED undertook an exercise with the support of external consultants to further assess and manage modern slavery risks. Based on a mapping of the Group's internal operations and supply chain, I-MED has identified the following areas as the highest potential modern slavery risk to the Group.

- Medical equipment, implants, IT hardware: I-MED's Tier 1 suppliers are predominantly
  multinationals with headquarters in countries with modern slavery, human rights and/or
  labour laws (i.e. in Australia, United States, European Union, New Zealand and the United
  Kingdom). However, the countries in which our Tier 1 suppliers have facilities (e.g. for
  manufacturing, assembly, distribution or sterilisation of medical equipment and medical
  implants) are associated with higher risk of labour exploitation, including child labour
  and low-skilled workers, hazardous working conditions due to political instability, poor
  governance, low levels of regulation, poverty.
- The procurement of medical goods including disposable and low-cost items like gloves, masks, disposable gowns may be produced in manufacturing industries offshore and/ or which source and use raw materials. Both factors are known to carry higher modern slavery risks either as a result of high-risk geographies from when they are sourced, the transparency of arrangements in place to procure them from multi-tiered supply chains, the vulnerable populations involved in their production, or a combination of those.
- Property services including cleaning and maintenance services are thought to carry baseskill labour risks and may be again linked to vulnerable populations.
- Building works: I-MED typically contracts with large suppliers which are subject to local region laws were labour is primarily employed through sub-contractors or agents. However, the construction industry's high reliance on labour employed through sub-contractors or agents, as well as the materials used, may have a complex multi-tiered supply chain. Cost and time schedule pressures, as well as a high concentration of migrant labour, create a higher level of risk of excessive working hours, debt bondage, wages below the minimum wage requirements, hazardous working environments, and deceptive and dangerous practices.



# How we assess and address those risks

I-MED has engaged external consultants to assist its Modern Slavery Risk assessment. This process includes the proprietary calculation of spend for every examined supplier during this term against a theoretical figure , providing I-MED with an overview of its supply chain that includes a complete ranking of potential risks and recommended actions for all entities with which it is engaged in direct procurement activities.

#### Table 1. I-MED Modern Slavery Risk Screening

Industry Rating	% Total Tier 1 Spend	Key Spend Categories with this Rating	Description of Modern Slavery Risk Factor	Actions or Controls
High	0.17%	• Overseas - Health and social work services	<ul> <li>High skilled professional providing services.</li> <li>Temporary and contract workers in Australia and overseas performing base- skilled labour can be vulnerable to modern slavery due to a range of factors, including opaque subcontracting arrangements, which can make it difficult to monitor working conditions.</li> </ul>	<ul> <li>No immediate action due to its nature</li> <li>Labour hire companies to have relevant certification, where required.</li> <li>A reduced number of high skilled professionals operate under entities registered overseas; however, I-MED engages people in Australia and is subject to Australian employment law and modern awards</li> </ul>
Moderate	0.43%	<ul> <li>Overseas - Medical and Australia uniforms</li> <li>Overseas - Medical, precision and optical instruments, watches and clocks</li> </ul>	<ul> <li>The textiles and apparel sector are recognised as a high-risk sector for modern slavery, including due to the use of raw materials such as cotton which may be produced using modern slavery, as well as exploitation in factories manufacturing textiles and apparel products.</li> <li>The countries in which our Tier 1 suppliers are manufacturing/sourcing materials for medical consumables are associated with higher risks of labour exploitation/hazardous working conditions due to political instability, poor governance, low levels of regulation and poverty.</li> </ul>	<ul> <li>I-MED undertook a deep dive due diligence exercise with existing high risk and potential future suppliers.</li> <li>I-MED sources Medical Equipment and service contracts from Australian operations of large multinational companies, or substantial Australian companies, with a public commitment to the Australian Modern Slavery Act.</li> <li>Monitor further into the future</li> <li>No immediate action due to low risk</li> </ul>
Moderate low	25%	<ul> <li>Australia - Health and social work services</li> <li>Australia - Medical, precision and optical instruments, watches and clocks</li> </ul>	<ul> <li>There is a high risk that public hospitals and health services are benefiting from modern slavery in supply chains, including through access to cheaper labour and services.</li> <li>The countries in which our Tier 1 suppliers are manufacturing/sourcing materials for medical consumables are associated with higher risks of labour exploitation/hazardous working conditions due to political instability, poor governance, low levels of regulation and poverty.</li> </ul>	<ul> <li>I-MED undertook a deep dive due diligence exercise with existing high risk and potential future suppliers.</li> <li>I-MED sources goods and services contracts from Australian operations of large multinational companies, or substantial Australian companies, with a public commitment to the Australian Modern Slavery Act.</li> </ul>
Low	74.4%	<ul> <li>Australia - Real estate services</li> <li>Australia - Other business services</li> <li>Australia - Computer and related services</li> <li>Australia - Construction work   Australia - Other business services</li> </ul>	• The use of migrant workers in sectors such as cleaning and construction can also involve modern slavery risks, including where these workers may not understand their workplace rights and entitlements. From time to time, where our construction contractors have a need for temporary or contract workers, they are generally highly skilled trades or educated professionals such as engineers or designers rather than base-skilled labour.	<ul> <li>No immediate action due to low risk</li> <li>I-MED undertook a deep dive due diligence exercise with existing high risk and potential future suppliers.</li> <li>I-MED procures leases from Australian public and private hospitals, substantial private companies, and family trusts. The properties are often managed by large property management companies with a public commitment to the Australian Modern Slavery Act.</li> </ul>



Furthermore, to the results summarised in Table 1. I-MED Modern Slavery Risk Screening, 50+ Tier 1 of suppliers were shortlisted to participate in a detailed Self-Assessment Questionnaire (SAQ) to reconfirm the risk profile and review if additional actions were required.

#### Main conclusions

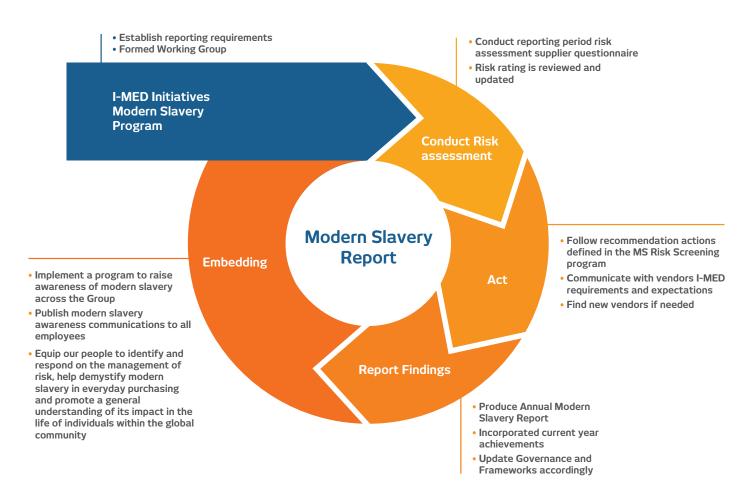
Below are the main insights obtained from the MS Risk Screening and SAQ:

- The assessment results indicate that 90% of respondents reported mitigation scores ranging between Advanced and Developing. This suggests a strong level of supplier due diligence and a committed effort to track and manage risks within their supply chains.
- Also, 80% of SAQ respondents were required to and had submitted their own Modern Slavery Statement pursuant to the Act, in the previous financial year and a higher number of suppliers themselves conduct due diligence through their own supply chains;
- More than half of SAQ respondents work with independent third parties to assess and report on modern slavery risks in their supply chain;
- Approximately 80% of SAQ respondents reported having appropriate outcomes in place with their own suppliers for non-compliance with anti-slavery practices and had a program to remediate infractions;
- Approximately 85% of SAQ respondents had an avenue for whistleblowing disclosures to be received and investigated; and
- All suppliers reported not having received any notice of violation in connection with noncompliance within the last 3 years

In summary, as validated above, an extensive proportion of I-MED spend is spent locally, with suppliers who are predominantly headquartered in countries with a low risk of modern slavery. Those which are not are still managed through local clinical regulations. In conclusion, most of the I-MED Group's largest suppliers have significant modern slavery mitigation strategies within their own operations and supply chains.

# How our modern slavery response is evolving

At I-MED, we are focused on refining our modern slavery response as we continue to strengthen our understanding of how to effectively identify and manage modern slavery risks. The graphic below explains how the methodology we have adopted to continuously improve how we assess, respond and embed our learning related to modern slavery into our supply chain.





In the next 12 to 24 months, the Group's priorities with regards to modern slavery risk mitigation will include as follows:

Below are the list of initiatives and actions to be prioritised in the coming 12 to 24 months based on the goals and findings from this current report.

• Focus on review of suppliers with complex supply chains and offshore operations:

As part of its review of supplier due diligence, the Group will be guided by the results of the 2024 Modern Slavery Risk Screening in prioritising focus on suppliers with a High to Medium Risk Rating and remaining vigilant of various information sources to detect new and emerging risks across our Supply Chain.

• Continue to improve governance and policy framework:

Continue to ensure material risks and opportunities, including risks relating to modern slavery, are escalated through our executive leadership team to the Board, in support of I-MED's broader governance framework.

• Documented remediation and response approach:

Document a clear remediation and response plan if practices that do not meet our standards are identified, and/or for which a high modern slavery risk is present. Such processes should clearly describe ways in which the Group will respond and 'make good' any harm and prevent and mitigate any potential harms. The framework must also assign responsibility for leading and managing remediation and ongoing assessment of the effectiveness of any

#### Internal team training:

The Chartered Institute of Procurement and Supply (CIPS) Corporate Code of Ethics was developed as part of its commitment to reinforcing global ethical values across all procurement and supply practices. The Group Procurement team responsibility for sourcing, supplier selection and supplier management successfully should annually complete the CIPS Ethics Test enabling I-MED Group to achieve the Corporate Ethics Mark.

#### • Raising internal awareness of modern slavery issues:

Undertake activities to raise awareness of modern slavery across the Group. Throughout the year we will publish modern slavery awareness communications to all our people via our internal news and communication sites. The program will help our people identify and respond on the management of risk, help demystify modern slavery in everyday purchasing and promote a general understanding of its impact in the life of individuals within the global community.

## Consultation across the Group

This Statement has been prepared by the Reporting Entity in consultation across the I-MED Group, including engaging stakeholders in areas such as Procurement, Legal and People and Culture It has been reviewed and approved by the Reporting Entity and Group's Board of Directors.

Approved by the Reporting Entity's principal governing body on behalf of all reporting entities in the I-MED Group

Dr Shrey Viranna Image Holdco Pty Ltd Director



